

UNITED STATES V. GLENN JOHNSON
STATEMENT OF LOSS

Please print or type information.

NAME OF SUBDIVISION: _____

CLAIMANT(S) NAME: _____

CURRENT ADDRESS: _____

CITY, STATE, ZIP CODE: _____

ADDRESS AT TIME OF DAMAGES: _____

CITY, STATE, ZIP CODE: _____

TELEPHONE NUMBER(S): HOME:_____ BUSINESS:_____

Did you own or rent this home during the time period 1991 - 1998?

OWN:_____ RENT:_____

***AMOUNT OF MONETARY LOSS:**

A. Personal expenses for damages during 1991-1998: \$_____

B. Personal expenses for hiring plumbers
 during 1991-1998: \$_____

C. Any other expenses incurred related to sewer service
 problems during 1991-1998[please describe on additional
 page]: \$_____

TOTAL AMOUNT OF MONETARY LOSS: \$_____

REMINDER: Please attach receipts, cancelled checks and other documents supporting items A,B, and C above. If no receipts are available complete the following (there is no need to complete this section if you have included supporting documents):

(1) Damages: _____

(2) Cost of repair(s): _____

(3) Date of repair(s): _____

(4) Repairs made by: _____

(5) Reason why receipts are not available: _____

If you have been reimbursed for any portion of expenses claimed,
please fill out the following:

REIMBURSEMENT:

AMOUNT _____

NAME OF REIMBURSER _____

ADDRESS _____

TELEPHONE NUMBER _____

IF REIMBURSEMENT WAS THROUGH AN INSURANCE COMPANY:

POLICY NUMBER _____

CERTIFICATION

I declare under penalty of perjury under the laws of the United
States of America that the above information is true and correct
to the best of my knowledge.

SIGNATURE: _____ DATE: _____

TYPE/PRINT NAME: _____

*It is general policy that participation in the restitution
process would not prejudice the rights of victims to file civil
suits for damages against the defendant herein and all other
appropriate parties.